

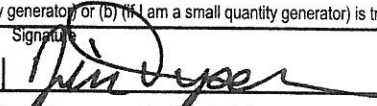
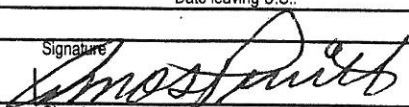
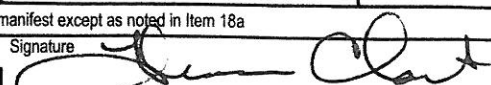
Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number KSD007246846		2. Page 1 of 1		3. Emergency Response Phone (800) 455-3716		4. Manifest Tracking Number 008037710 FLE							
5. Generator's Name and Mailing Address Clean Harbors Env Services LLC 2549 North New York Street Wichita, KS 67219 (316) 269-7400						Generator's Site Address (if different than mailing address) SAME									
6. Transporter 1 Company Name Clean Harbors Env Services LLC						U.S. EPA ID Number NE0881723513									
7. Transporter 2 Company Name						U.S. EPA ID Number									
8. Designated Facility Name and Site Address Clean Harbors Env Services Inc 2247 South Highway 71 Kimball, NE 68145 (308) 235-4012						U.S. EPA ID Number NE0881723513									
9a. HM						9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity		12. Unit Wt./Vol.		13. Waste Codes	
								No. Type							
GENERATOR						1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S., (TOLUENE, LEAD), 9, PG III						V		D004 D005 D007	
						2.								D008 D039 D040	
						3.									
						4.									
14. Special Handling Instructions and Additional Information 1. CH821506X08 ER81171															
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.															
Generator's/Offor's Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____															
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____															
17. Transporter Acknowledgment of Receipt of Materials															
Transporter 1 Printed/Typed Name Harold C Pruitt Signature _____ Month 2 Day 11 Year 05															
Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____															
18. Discrepancy															
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection															
18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____															
Facility's Phone: _____															
18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____															
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)															
1. H040 2. _____ 3. _____ 4. _____															
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a															
Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____															

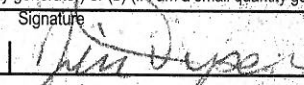
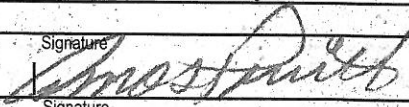
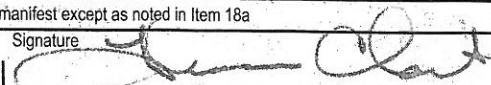
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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number KSD007246846	2. Page 1 of 1	3. Emergency Response Phone (800) 483-3718	4. Manifest Tracking Number 008037710 FLE	
5. Generator's Name and Mailing Address Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219			Generator's Site Address (if different than mailing address) SAME			
Generator's Phone: (316) 269-7400						
6. Transporter 1 Company Name CLEAN HARBORS ENV			U.S. EPA ID Number MA00393222850			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Clean Harbors Env Services Inc 2247 South Highway 71 Kimball, NE 69145			U.S. EPA ID Number NED981723513			
Facility's Phone: (308) 235-4012						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
x	1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S., (TOLUENE, LEAD), 9, PG III	1 CM		EST 12	Y	D004 D005 D007 D008 D039 D040
	2.					
	3.					
	4.					
14. Special Handling Instructions and Additional Information 1. CH831506X0B ERG#171						
TRUCK # CHRT # CHRT 25710						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name SIM TYSON			Signature 		Month Day Year 12 10 15	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name AMOS C PRUITT			Signature 		Month Day Year 12 11 15	
Transporter 2 Printed/Typed Name			Signature		Month Day Year	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____						
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H040		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name Thomas Clark			Signature 		Month Day Year 12 12 15	

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number KSD007246846	2. Page 1 of 1	3. Emergency Response Phone (800) 483-3718	4. Manifest Tracking Number 008037710 FLE								
5. Generator's Name and Mailing Address Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219			Generator's Site Address (if different than mailing address) SAME										
Generator's Phone: (316) 269-7400													
6. Transporter 1 Company Name CLEAN HARBORS ENV			U.S. EPA ID Number MDT373222250										
7. Transporter 2 Company Name			U.S. EPA ID Number										
8. Designated Facility Name and Site Address Clean Harbors Env Services Inc 2247 South Highway 74 Kimball, NE 68145			U.S. EPA ID Number NE0961723513										
Facility's Phone: (308) 235-4012													
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes						
			No.	Type									
	1	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., (TOLUENE, LEAD), 9, PG III	1	CM	12	Y	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">D004</td> <td style="width:33%;">D005</td> <td style="width:33%;">D007</td> </tr> <tr> <td>D008</td> <td>D039</td> <td>D040</td> </tr> </table>	D004	D005	D007	D008	D039	D040
	D004	D005	D007										
	D008	D039	D040										
2													
3													
4													
14. Special Handling Instructions and Additional Information 1. CH821506X0E EPC#171 TRUCK # CHRT #													
CHRT - SM10													
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.													
Generator's/Offor's Printed/Typed Name SIM TYSON					Signature 								
					Month Day Year 2 10 15								
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input checked="" type="checkbox"/> Export from U.S. Port of entry/exit: _____												
	Transporter signature (for exports only): _____ Date leaving U.S.: _____												
	17. Transporter Acknowledgment of Receipt of Materials												
	Transporter 1 Printed/Typed Name AMOS C PRUITT					Signature 							
	Transporter 2 Printed/Typed Name					Signature							
						Month Day Year 2 11 15							
DESIGNATED FACILITY	18. Discrepancy												
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection												
	Manifest Reference Number: _____												
	18b. Alternate Facility (or Generator)					U.S. EPA ID Number							
	Facility's Phone: _____												
	18c. Signature of Alternate Facility (or Generator)					Month Day Year							
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
	1. H040		2.		3.		4.						
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a												
	Printed/Typed Name Thomas Clark					Signature 							
						Month Day Year 02 12 15							



2247 South Highway 71
Kimball, NE 69145

TEL 308-235-4012
FAX 308-235-4307
www.cleanharbors.com

DATE: 2/12/2015

MANIFEST: 008037710FLE

Dear Valued Customer:

In accordance with 40 CFR 264.12(b), Clean Harbors Environmental Services, Inc., Kimball Facility, has appropriate state and federal permits to accept, store, and/or treat the waste you shipped to our facility. This letter should be kept on file with your copy of the signed manifest.

Clean Harbors Environmental Services, Inc. makes every effort to ensure that signed copies of manifests are returned to the waste generator as quickly as possible following receipt of your waste at our facility. This allows us to provide you with rapid verification that your waste shipment arrived safely at our waste management facility.

Once your waste has been received, Clean Harbors' personnel will verify that the quantity that has been received matches the quantity that was shipped. We also inspect the material and conduct testing to ensure that it meets the facility's waste acceptance criteria as described in our Waste Analysis Plan, as well as processing requirements. Every effort is made to complete the waste verification as quickly as possible; however, it is possible that the signed copy of the manifest may be returned to you before the waste verification process is completed. If a significant discrepancy, as defined by US EPA regulations (40 CFR 264.72), is discovered during the waste verification process, we will contact you in order to reconcile the discrepancy. Additionally, we will work with you to make any corrections to the waste manifest that are necessary.

Sincerely,

Receiving Department